

Medicare Creditable Coverage Determinations: Commercial

Determinations for Products with an Effective Date in 2019

Only the Rx classifications below impact determination. Contraception, Out of Network, etc do not impact determination.

If there is **no Rx benefit**, then it is **NOT CREDITABLE**.

Medicare products with Rx coverage are CREDITABLE.

Based on analysis performed by Milliman (Exhibits_20181019.xlsx received 10/19/2018)

****Minimum integrated HRA contribution note:**

Reflects the minimum integrated, medical and Rx, health reimbursement account (HRA) contribution in order to meet creditable coverage (rounded to nearest \$100).

Assumes the same baseline Rx allocation as the integrated deductible and out-of-pocket maximum.

Assumes no rollover of HRA contributions, per CMS regulation.

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
FRNY-Premier-DC-001-S (2019)	FRNYPremierDC001S19	MVP Secure	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Secure	Individual	Fail	HRA does not apply to "Individual"
FRVT-VT-B-004-S (2019)	FRVTVTB004S19, FRVTVTBA2004S19	MVP VT Bronze 4 MVP VT Bronze 4 American Indian/ Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Fail	HRA does not apply to "Individual"
FRVT-VT Plus-B-005-N (2019)	FRVTVT PlusB005N19, FRVTVT PlusBA2005N19	MVP VT Plus Bronze 5 MVP VT Plus Bronze 5 American Indian /Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT Plus	Individual	Fail	HRA does not apply to "Individual"
FRVT-VT-BA2-004-S (2019)	FRVTVTBA2004S19	MVP VT Bronze 4 American Indian Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Fail	HRA does not apply to "Individual"
FRVT-VT Plus-BA2-005-N (2019)	FRVTVT PlusBA2005N19	MVP VT Plus Bronze 5 American Indian Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT Plus	Individual	Fail	HRA does not apply to "Individual"

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY-Premier Plus-DB-008-N (2019)	NYHMODB008N19	MVP Premier Plus Bronze 8	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus	Individual	Fail	HRA does not apply to "Individual"
NY-Premier-DC-001-S (2019)	NYPremierDC001S19	MVP Secure	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Secure	Individual	Fail	HRA does not apply to "Individual"
FRNY-Premier Plus-DB-001-N (2019)	FRNYHMODB001N19, FRNYHMODBA2001N19	MVP Premier Plus Bronze 1 MVP Premier Plus Bronze 1 American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus	Individual	Pass	
FRNY-Premier Plus-DB-002-N (2019)	FRNYHMODB002N19, FRNYHMODBA2002N19	MVP Premier Plus Bronze 2 MVP Premier Plus Bronze 2 American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus	Individual	Pass	
FRNY-Premier-DB-002-S (2019)	FRNYPremierDB002S19, FRNYPremierDB002S19CO, FRNYPremierDBA2002S19, FRNYPremierDBA2002S19CO	MVP Premier Bronze 2 MVP Premier Bronze 2 -Child Only MVP Premier Bronze 2 -American Indian/Alaskan Native MVP Premier Bronze 2 - American Indian/ Alaskan Native Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier Plus-DBA1-001-N (2019)	FRNYHMODBA1001N19	MVP Premier Plus Bronze 1 American Indian Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus	Individual	Pass	
FRNY-Premier Plus-DBA1-002-N (2019)	FRNYHMODBA1002N19	MVP Premier Plus Bronze 2 American Indian Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus	Individual	Pass	

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FRNY-Premier-DBA1-002-S (2019)	FRNYPremierDBA1002S19CO, FRNYPremierDBA1002S19CO	MVP Premier Bronze 2 Child Only American Indian Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier Plus-DG-001-N (2019)	FRNYHMODG001N19, FRNYHMODGA2001N19	MVP Premier Plus Gold 1 MVP Premier Plus Gold 1 American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus	Individual	Pass	
FRNY-Premier-DG-001-S (2019)	FRNYPremierDG001S19, FRNYPremierDG001S19CO, FRNYPremierDGA2001S19, FRNYPremierDGA2001S19CO	MVP Premier Gold 1, MVP Premier Gold 1 Child Only MVP Premier Gold 1 American Indian/ Alaskan Native MVP Premier Gold 1 American Indian/ Alaskan Native Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DG-002-S (2019)	FRNYPremierDG002S19, FRNYPremierDG002S19CO, FRNYPremierDGA2002S19, FRNYPremierDGA2002S19CO	MVP Premier Gold 2, MVP Premier Gold 2 Child Only MVP Premier Gold 2 American Indian/ Alaskan Native MVP Premier Gold 2 American Indian/ Alaskan Native Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier Plus-DGA1-001-N (2019)	FRNYHMODGA1001N19	MVP Premier Plus Gold 1 American Indian, Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus	Individual	Pass	
FRNY-Premier-DGA1-001-S (2019)	FRNYPremierDGA1001S19, FRNYPremierDGA1001S19CO	MVP Premier Gold 1 American Indian, Alaskan Native MVP Premier Gold 1 American Indian, Alaskan Native Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DGA1-002-S (2019)	FRNYPremierDGA1002S19, FRNYPremierDGA1002S19CO	MVP Premier Gold 2 American Indian Native Alaskan, MVP Premier Gold 2 American Indian Native Alaskan Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
FRNY-Premier-DP-001-S (2019)	FRNYPremierDP001S19, FRNYPremierDP001S19CO, FRNYPremierDPA2001S19, FRNYPremierDPA2001S19CO	MVP Premier Platinum 1, MVP Premier Platinum 1 Child Only MVP Premier Platinum 1, American Indian /Alaskan Native MVP Premier Platinum 1 Child Only American Indian/Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DPA1-001-S (2019)	FRNYPremierDPA1001S19, FRNYPremierDPA1001S19CO	MVP Premier Platinum 1 American Indian Native Alaskan, MVP Premier Platinum 1 American Indian Native Alaskan Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DS-001-S (2019)	FRNYPremierDS001S19, FRNYPremierDS001S19CO, FRNYPremierDSA2001S19, FRNYPremierDSA2001S19CO	MVP Premier Silver 1, MVP Premier Silver 1 Child Only MVP Premier Silver 1 American Indian /Native Alaskan MVP Premier Silver 1 Child Only American Indian /Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DS-002-N (2019)	FRNYPremierDS002N19, FRNYPremierDSA2002N19	MVP Premier Silver 2 MVP Premier Silver 2 American Indian /Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DS-011-N (2019)	FRNYPremierDS011N19, FRNYPremierDSA2011N19	MVP Premier Silver 11 MVP Premier Silver 11 American Indian /Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DS1-001-S-73 (2019)	FRNYPremierDS1001S7319, FRNYPremierDS1001S7319CO	MVP Premier Silver 1 CSR 73% MVP Premier Silver 1 Child Only CSR 73%	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DS1-001-S-87 (2019)	FRNYPremierDS1001S8719, FRNYPremierDS1001S8719CO	MVP Premier Silver 1 CSR 87% MVP Premier Silver 1 Child Only CSR 87%	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	

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FRNY-Premier-DS1-001-S-94 (2019)	FRNYPremierDS1001S9419, FRNYPremierDS1001S9419CO	MVP Premier Silver 1 CSR 94% MVP Premier Silver 1 Child Only CSR 94%	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DS1-002-N-73 (2019)	FRNYPremierDS1002N7319	MVP Premier Silver 2 CSR 73%	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DS1-002-N-87 (2019)	FRNYPremierDS1002N8719	MVP Premier Silver 2 CSR 87%	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DS1-002-N-94 (2019)	FRNYPremierDS1002N9419	MVP Premier Silver 2 CSR 94%	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DS1-011-N-73 (2019)	FRNYPremierDS1011N7319	MVP Premier Silver 11 CSR 73%	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DS1-011-N-87 (2019)	FRNYPremierDS1011N8719	MVP Premier Silver 11 CSR 87%	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DS1-011-N-94 (2019)	FRNYPremierDS1011N9419	MVP Premier Silver 11 CSR 94%	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	

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FRNY-Premier-DSA1-001-S (2019)	FRNYPremierDSA1001S19, FRNYPremierDSA1001S19CO	MVP Premier Silver 1 American Indian Alaskan Native MVP Premier Silver 1 American Indian Alaskan Native Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DSA1-002-N (2019)	FRNYPremierDSA1002N19	MVP Premier Silver 2 American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-Premier-DSA1-011-N (2019)	FRNYPremierDSA1011N19	MVP Premier Silver 11 American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
FRNY-PremierH-DB-001-S (2019)	FRNYPremierHDB001S19, FRNYPremierHDB001S19CO, FRNYPremierHDBA2001S19, FRNYPremierHDBA2001S19CO	MVP Premier HDHP Bronze 1 MVP Premier Bronze 1 Child Only MVP Premier HDHP Bronze 1 American Indian / Alaskan Native MVP Premier Bronze 1 Child Only American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
FRNY-Premier PlusH-DB-003-N (2019)	FRNYHMOHDB003N19, FRNYHMOHDBA2003N19	MVP Premier Plus HDHP Bronze 3 MVP Premier Plus HDHP Bronze 3 American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus HDHP	Individual	Pass	
FRNY-PremierH-DBA1-001-S (2019)	FRNYPremierHDBA1001S19, FRNYPremierHDBA1001S19CO	MVP Premier HDHP Bronze 1 American Indian / Alaskan Native MVP Premier Bronze 1 American Indian / Alaskan NativeChild Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
FRNY-Premier PlusH-DBA1-003-N (2019)	FRNYHMOHDBA1003N19	MVP Premier Plus HDHP Bronze 3 American Indian Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus HDHP	Individual	Pass	

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FRNY-PremierH-DG-001-NN (2019)	FRNYPremierHDG001NN19S/F FRNYPremierHDGA2001NN19S/F	MVP Premier HDHP Gold 1 MVP Premier HDHP Gold 1 American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
FRNY-PremierH-DG-002-N (2019)	FRNYPremierHDG002N19S/F FRNYPremierHDGA2002N19S/F	MVP Premier HDHP Gold 2 Single MVP Premier HDHP Gold 2 Single American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
FRNY-PremierH-DGA1-001-NN (2019)	FRNYPremierHDGA1001NN19, FRNYPremierHDGA1001NN19SF	MVP Premier HDHP Gold 1 American Indian Alaskan Nativ MVP Premier HDHP Gold 1 Family American Indian Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
FRNY-PremierH-DGA1-002-N (2019)	FRNYPremierHDGA1002N19S/F,	MVP Premier HDHP Gold 2 Single American Indian Alaskan Nativ	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
FRNY-PremierH-DS-003-N (2019)	FRNYPremierHDS003N19, FRNYPremierHDSA2003N19S/F	MVP Premier HDHP Silver 3 MVP Premier HDHP Silver 3 American Indian Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
FRNY-PremierH-DS1-003-N-73 (2019)	FRNYPremierHDS1003N7319,	MVP Premier HDHP Silver 3	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
FRNY-PremierH-DS1-003-N-87 (2019)	FRNYPremierHDS1003N8719,	MVP Premier HDHP Silver 3	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	

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FRNY-PremierH-DS1-003-N-94 (2019)	FRNYPremierHDS1003N9419,	MVP Premier HDHP Silver 3	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
FRNY-PremierH-DSA1-003-N (2019)	FRNYPremierHDSA1003N19	MVP Premier HDHP Silver 3 Single American Indian Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
FRVT-VT Plus-B-001-N (2019)	FRVTVT PlusB001N19, FRVTVT PlusBA2001N19	MVP VT Plus Bronze 1 MVP VT Plus Bronze 1 American Indian /Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT Plus	Individual	Pass	
FRVT-VT-B-002-S (2019)	FRVTVTB002S19, FRVTVTBA2002S19	MVP VT Bronze 2 MVP VT Bronze 2 American Indian / Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT Plus-BA1-001-N (2019)	FRVTVT PlusBA1001N19	MVP VT Plus Bronze 1 American Indian Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT Plus	Individual	Pass	
FRVT-VT-BA1-002-S (2019)	FRVTVTBA1002S19	MVP VT Bronze 2 American Indian Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-BA1-004-S (2019)	FRVTVTBA1004S19	MVP VT Bronze 4 American Indian Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	

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FRVT-VT Plus-BA1-005-N (2019)	FRVTVT PlusBA1005N19	MVP VT Plus Bronze 5 American Indian Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT Plus	Individual	Pass	
FRVT-VT Plus-BA2-001-N (2019)	FRVTVT PlusBA2001N19	MVP VT Plus Bronze 1 American Indian Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT Plus	Individual	Pass	
FRVT-VT-BA2-002-S (2019)	FRVTVTBA2002S19	MVP VT Bronze 2 American Indian Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-HMO-C-001-N (2019)	FRVTHMOC00119	MVP Standard Secure	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP Secure	Individual	Pass	
FRVT-VT-G-001-S (2019)	FRVTVTG001S19, FRVTVTGA2001S19	MVP VT Gold 1 MVP VT Gold 1 American Indian / Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT Plus-G-002-N (2019)	FRVTVT PlusG002N19, FRVTVT PlusGA2002N19	MVP VT Plus Gold 2 MVP VT Plus Gold 2 American Indian /Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT Plus	Individual	Pass	
FRVT-VT-GA1-001-S (2019)	FRVTVTGA1001S19	MVP VT Gold 1 American Indian /Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	

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FRVT-VT Plus-GA1-002-N (2019)	FRVTVT PlusGA1002N19	MVP VT Plus Gold 2 American Indian Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT Plus	Individual	Pass	
FRVT-VT-GA2-001-S (2019)	FRVTVTGA2001S19	MVP VT Gold 1 American Indian, Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT Plus-GA2-002-N (2019)	FRVTVT PlusGA2002N19	MVP VT Plus Gold 2 American Indian, Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT Plus	Individual	Pass	
FRVT-VTH-B-003-S (2019)	FRVTVTHB003S19S/F	MVP VT HDHP Bronze 3	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-BA1-003-S (2019)	FRVTVTHBA1003S19S/F	MVP VT HDHP Bronze 3 American Indian Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-BA2-003-S (2019)	FRVTVTHBA2003S19S/F	MVP VT HDHP Bronze 3	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-G-003-N (2019)	FRVTVTHG003N19S/F	MVP VT HDHP Gold 3	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	

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FRVT-VTH-GA1-003-N (2019)	FRVTVTHGA1003N19S/F	MVP VT HDHP Gold 3 Single American Indian Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-GA2-003-N (2019)	FRVTVTHGA2003N19S/F	MVP VT HDHP Gold 3 American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-S-002-N (2019)	FRVTVTHS002N19	MVP VT HDHP Silver 2	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-S-004-S (2019)	FRVTVTHS004S19S/F	MVP VT HDHP Silver 4	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-S2-001-N (2019)	FRVTVTHS2001N7319	VT VT HDHP Silver 1 CSR 73%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-S2-002-N (2019)	FRVTVTHS2002N8719	VT VT HDHP Silver 2 CSR 87%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-S2-003-N (2019)	FRVTVTHS2003N9419	VT VT HDHP Silver 3 CSR 94%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	

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FRVT-VTH-S2-004-N (2019)	FRVTVTHS2004N7719	VT VT HDHP Silver 4 CSR 77%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-S4-001-S (2019)	FRVTVTHS4001S7319S/F	VT MVP VT HDHP Silver 1 CSR 73%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-S4-002-S (2019)	FRVTVTHS4002S8719S/F	VT MVP VT HDHP Silver 2 CSR 87%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-S4-003-S (2019)	FRVTVTHS4003S9419S/F	VT MVP VT HDHP Silver 3 CSR 94%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-S4-004-S (2019)	FRVTVTHS4004S7719S/F	VT MVP VT HDHP Silver 4 CSR 77%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-SA1-002-N (2019)	FRVTVTHSA1002N19	VT MVP VT HDHP Silver 2 American Indian, Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-SA1-004-S (2019)	FRVTVTHSA1004S19S/F	VT MVP VT HDHP Silver 4 American Indian Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	

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FRVT-VTH-SA2-002-N (2019)	FRVTVTHSA2002N19	VT MVP VT HDHP Silver 2 American Indian, Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VTH-SA2-004-S (2019)	FRVTVTHSA2004S19S/F	VT MVP VT HDHP Silver 4 American Indian, Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
FRVT-VT-P-001-S (2019)	FRVTVTP001S19	VT VT Platinum 1	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-PA1-001-S (2019)	FRVTVTPA1001S19	VT VT Platinum 1 American Indian Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-PA2-001-S (2019)	FRVTVTPA2001S19	VT VT Platinum 1 American Indian Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-S-001-N (2019)	FRVTVTS001N19	VT VT Silver 1	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-S-003-S (2019)	FRVTVTS003S19	VT VT Silver 3	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
FRVT-VT-S1-001-N (2019)	FRVTVTS1001N7319	VT VT Silver 1 CSR 73%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-S1-002-N (2019)	FRVTVTS1002N8719	VT VT Silver 1 CSR 87%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-S1-003-N (2019)	FRVTVTS1003N9419	VT VT Silver 1 CSR 94%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-S1-004-N (2019)	FRVTVTS1004N7719	VT VT Silver 1 CSR 77%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-S3-001-S (2019)	FRVTVTS3001S7319	VT VT Silver 3 CSR 73%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-S3-002-S (2019)	FRVTVTS3002S8719	VT VT Silver 3 CSR 87%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-S3-003-S (2019)	FRVTVTS3003S9419	VT VT Silver 3 CSR 94%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
FRVT-VT-S3-004-S (2019)	FRVTVTS3004S7719	VT VT Silver 3 CSR 77%	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-SA1-001-N (2019)	FRVTV TSA1001N19	VT VT Silver 1 American Indian/ Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-SA1-003-S (2019)	FRVTV TSA1003S19	VT VT Silver 3 American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-SA2-001-N (2019)	FRVTV TSA2001N19	VT VT Silver 1 American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
FRVT-VT-SA2-003-S (2019)	FRVTV TSA2003S19	VT VT Silver 3 American Indian / Alaskan Native	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
NY-Premier Plus-DB-001-N (2019)	NYHMODB001N19	MVP Premier Plus Bronze 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus	Individual	Pass	
NY-Premier Plus-DB-002-N (2019)	NYHMODB002N19	MVP Premier Plus Bronze 2	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus	Individual	Pass	

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NY-Premier-DB-002-S (2019)	NYPremierDB002S19	MVP Premier Bronze 2	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
NY-Premier-DB-002-S-CO (2019)	NYPremierDB002S19CO	MVP Premier Bronze 2 Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
NY-Premier Plus-DG-001-N (2019)	NYHMODG001N19	MVP Premier Plus Gold 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus	Individual	Pass	
NY-Premier-DG-001-S (2019)	NYPremierDG001S19	MVP Premier Gold 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
NY-Premier-DG-001-S-CO (2019)	NYPremierDG001S19CO	MVP Premier Gold 1 Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
NY-Premier-DG-002-S (2019)	NYPremierDG002S19	MVP Premier Gold 2	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
NY-Premier-DG-002-S-CO (2019)	NYPremierDG002S19CO	MVP Premier Gold 2 Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	

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NY-Premier Plus-DG-004-N (2019)	NYHMODG004N19	MVP Premier Plus Gold 4	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus	Individual	Pass	
NY-Premier Plus-DG-005-N (2019)	NYHMODG005N19	MVP Premier Plus Gold 5	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus	Individual	Pass	
NY-Premier-DP-001-S (2019)	NYPremierDP001S19	MVP Premier Platinum 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
NY-Premier-DP-001-S-CO (2019)	NYPremierDP001S19CO	MVP Premier Platinum 1 Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
NY-Premier-DS-001-S (2019)	NYPremierDS001S19	MVP Premier Silver 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
NY-Premier-DS-001-S-CO (2019)	NYPremierDS001S19CO	MVP Premier Silver 1 Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
NY-Premier-DS-002-N (2019)	NYPremierDS002N19	MVP Premier Silver 2	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	

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NY-Premier-DS-011-N (2019)	NYPremierDS011N19	MVP Premier Silver 11	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
NY-Premier PlusH-DB-001-NN (2019)	NYHMOHDB001NN19	MVP Premier Plus HDHP Bronze 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus HDHP	Individual	Pass	
NY-PremierH-DB-001-S (2019)	NYPremierHDB001S19	MVP Premier HDHP Bronze 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
NY-PremierH-DB-001-S-CO (2019)	NYPremierHDB001S19CO	MVP Premier HDHP Bronze 1 Child Only	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
NY-Premier PlusH-DB-003-N (2019)	NYHMOHDB003N19	MVP Premier Plus HDHP Bronze 3	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus HDHP	Individual	Pass	
NY-Premier PlusH-DB-006-N (2019)	NYHMOHDB006N19	MVP Premier Plus HDHP Bronze 6	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier Plus HDHP	Individual	Pass	
NY-PremierH-DG-001-NN (2019)	NYPremierHDG001NN19 S/F	MVP Premier HDHP Gold 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	

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NY-PremierH-DG-002-N (2019)	NYPremierHDG002N19 S/F	MVP Premier HDHP Gold	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
NY-PremierH-DS-001-NN (2019)	NYPremierHDS001NN19 S/F	MVP Premier HDHP Silver 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
NY-PremierH-DS-003-N (2019)	NYPremierHDS003N19 S/F	MVP Premier HDHP Silver 3	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier HDHP	Individual	Pass	
NY-POS-DP-001-S (2019)	NYPOSDP001S19	MVP Premier Platinum 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Premier	Individual	Pass	
VT-VTH-S-002-N II (2019)	VTVTHS002NII19, VTVTHS002NII19S/F	VT HDVT Silver 2 - Reflective VT HDVT Silver 2 - Reflective	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
VT-VTH-S-004-S II (2019)	VTVTHS004SII19S/F	MVP VT Silver 4 Reflective HDHP	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT HDHP	Individual	Pass	
VT-VT-S-001-N II (2019)	VTVTS001NII19	MVP VT Silver 1 Plus Reflective HDHP	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	

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VT-VT-S-003-S II (2019)	VTVTS003SII19	MVP VT Silver 4 Reflective HDHP	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP VT	Individual	Pass	
NY2EDB068XL	NY2EDB068XLAS, NY2EDB068XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Fail	\$900
Rider not coplan	N/A		RX505LGF	No	No	NY	AR44	HMO	Large	Fail	N/A
Rider not coplan	N/A		RX512L	No	No	NY	AR44	HMO	Large	Fail	N/A
Rider not coplan	N/A		RX512LGF	No	No	NY	AR44	HMO	Large	Fail	N/A
Rider not coplan	N/A		RXNY2EPO614ZL	No	No	NY	AR43	Preferred Suite	Large	Fail	N/A
NEHDF7L	NEHDF7LS, NEHDF7LF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY1EPC019XL	NY1EPC019XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY1HMO012XL	NY1HMO012XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO013XL	NY1HMO013XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO016XL	NY1HMO016XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO018XL	NY1HMO018XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO019XL	NY1HMO019XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO020XL	NY1HMO020XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	

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NY1HMO021XL	NY1HMO021XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO022XL	NY1HMO022XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO025XL	NY1HMO025XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO026XL	NY1HMO026XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO028XL	NY1HMO028XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO029XL	NY1HMO029XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO030XLCA	NY1HMO030XLANCA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	

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NY1HMO031XLCA	NY1HMO031XLANCA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO032XLCA	NY1HMO032XLANCA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO036XLFED	NY1HMO036XLFED		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO036XLFED w RXNY1HMR706L	NY1HMO036XLFED		In Base / RXNY1HMO036XLFED w RXNY1HMR706L	No	No	NY	AR44	HMO	Large	Pass	
NY1HMO039XL	NY1HMO039XLAN, NY1HMO039XLANOCD		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	
NY2EDA001XL	NY2EDA001XLAS, NY2EDA001XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDA011XL	NY2EDA011XLAS, NY2EDA011XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	

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NY2EDA012XL	NY2EDA012XLAS, NY2EDA012XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDA018XLCA	NY2EDA018XLACAS, NY2EDA018XLACAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDA028XL	NY2EDA028XLAS, NY2EDA028XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDA042XL	NY2EDA042XLAS, NY2EDA042XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDA043XLCA	NY2EDA043XLACAS, NY2EDA043XLACAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB002XL	NY2EDB002XLAS, NY2EDB002XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB003XL	NY2EDB003XLAS, NY2EDB003XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	

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NY2EDB013XL	NY2EDB013XLAS, NY2EDB013XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB015XL	NY2EDB015XLAS, NY2EDB015XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB016XLCA	NY2EDB016XLACAS, NY2EDB016XLACAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB019XLCA	NY2EDB019XLACAS, NY2EDB019XLACAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB027XL	NY2EDB027XLAS, NY2EDB027XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB031XL	NY2EDB031XLAS, NY2EDB031XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB032XL	NY2EDB032XLAS, NY2EDB032XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	

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NY2EDB037XL	NY2EDB037XLAS, NY2EDB037XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB038XL	NY2EDB038XLAS, NY2EDB038XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB045XL	NY2EDB045XLAS, NY2EDB045XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB049XL	NY2EDB049XLAS, NY2EDB049XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB050XL	NY2EDB050XLAS, NY2EDB050XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB051XL	NY2EDB051XLAS, NY2EDB051XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDB054XL	NY2EDB054XLAS, NY2EDB054XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	

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NY2EDB067XL	NY2EDB067XLAS, NY2EDB067XLAF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EDE004XL	NY2EDE004XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE005XL	NY2EDE005XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE006XL	NY2EDE006XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE007XL	NY2EDE007XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE008XL	NY2EDE008XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE009XL	NY2EDE009XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	

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NY2EDE010XL	NY2EDE010XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE014XL	NY2EDE014XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE017XLCA	NY2EDE017XLAECA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE020XLCA	NY2EDE020XLAECA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE021XLCA	NY2EDE021XLAECA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE025XLCA	NY2EDE025XLAECA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE029XLCA	NY2EDE029XLAECA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	

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NY2EDE047XL	NY2EDE047XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE048XL	NY2EDE048XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE052XL	NY2EDE052XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2EDE056XL	NY2EDE056XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EDE058XL	NY2EDE058XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC021XL	NY2EPC021XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC021XL	NY2EPC021XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EPC021XL	NY2EPC021XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC022XL	NY2EPC022XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC022XL	NY2EPC022XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC022XL	NY2EPC022XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC023XL	NY2EPC023XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC023XL	NY2EPC023XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC023XL	NY2EPC023XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EPC026XL	NY2EPC026XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC026XL	NY2EPC026XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC026XL	NY2EPC026XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC027XL	NY2EPC027XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC027XL	NY2EPC027XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC027XL	NY2EPC027XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC028XL	NY2EPC028XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EPC028XL	NY2EPC028XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC028XL	NY2EPC028XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC030XL	NY2EPC030XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC030XL	NY2EPC030XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC030XL	NY2EPC030XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC035XL	NY2EPC035XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC035XL	NY2EPC035XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EPC035XL	NY2EPC035XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC036XL	NY2EPC036XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC036XL	NY2EPC036XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC036XL	NY2EPC036XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC039XL	NY2EPC039XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC039XL	NY2EPC039XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC046XL	NY2EPC046XLANCSEA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EPC046XL	NY2EPC046XLANCSEA		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC046XL	NY2EPC046XLANCSEA		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC047XLFLR	NY2EPC047XLANFLR		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC048XLFLR	NY2EPC048XLANFLR		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC049XLFLR	NY2EPC049XLANFLR		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC078XLCA	NY2EPC078XLANCA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC078XLCA	NY2EPC078XLANCA		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EPC078XLCA	NY2EPC078XLANCA		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC098XL	NY2EPC098XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC098XL	NY2EPC098XLAN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPC109XL	NY2EPC109XLAN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE042XL	NY2EPE042XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE042XL	NY2EPE042XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE042XL	NY2EPE042XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EPE051XL	NY2EPE051XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE051XL	NY2EPE051XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE051XL	NY2EPE051XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE061XLCA	NY2EPE061XLAECA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE061XLCA	NY2EPE061XLAECA		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE061XLCA	NY2EPE061XLAECA		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE073XL	NY2EPE073XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EPE073XL	NY2EPE073XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE073XL	NY2EPE073XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE074XL	NY2EPE074XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE074XL	NY2EPE074XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE074XL	NY2EPE074XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE082XLCA	NY2EPE082XLAECA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE082XLCA	NY2EPE082XLAECA		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EPE082XLCA	NY2EPE082XLAECA		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE089XL	NY2EPE089XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE089XL	NY2EPE089XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE089XL	NY2EPE089XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE090XL	NY2EPE090XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE090XL	NY2EPE090XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE090XL	NY2EPE090XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EPE091XL1D	NY2EPE091XLAE1D		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE091XL1D	NY2EPE091XLAE1D		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE091XL1D	NY2EPE091XLAE1D		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE092XL1D	NY2EPE092XLAE1D		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE092XL1D	NY2EPE092XLAE1D		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE092XL1D	NY2EPE092XLAE1D		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE099XL	NY2EPE099XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	

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NY2EPE099XL	NY2EPE099XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE099XL	NY2EPE099XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE105XLSS	NY2EPE105XLAESS		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE106XLFP	NY2EPE106XLAEFP		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EPE107XLHN	NY2EPE107XLAEHN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE032XLB	NY2EYE032XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE032XLB	NY2EYE032XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EYE033XLB	NY2EYE033XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE033XLB	NY2EYE033XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE033XLB	NY2EYE033XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE034XLB	NY2EYE034XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE034XLB	NY2EYE034XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE034XLB	NY2EYE034XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE040XLB	NY2EYE040XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EYE040XLB	NY2EYE040XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE040XLB	NY2EYE040XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE043XLB	NY2EYE043XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE043XLB	NY2EYE043XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE043XLB	NY2EYE043XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE050XLFLR	NY2EYE050XLAFLR		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE064XLB	NY2EYE064XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EYE064XLB	NY2EYE064XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE064XLB	NY2EYE064XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE065XLB	NY2EYE065XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE065XLB	NY2EYE065XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE065XLB	NY2EYE065XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE066XLB	NY2EYE066XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE066XLB	NY2EYE066XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	

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NY2EYE066XLB	NY2EYE066XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE068XLFLR	NY2EYE068XLAFLR		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE069XLB	NY2EYE069XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE069XLB	NY2EYE069XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE070XLB	NY2EYE070XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE070XLB	NY2EYE070XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE070XLB	NY2EYE070XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EYE072XLB	NY2EYE072XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE072XLB	NY2EYE072XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE072XLB	NY2EYE072XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE084XLB	NY2EYE084XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE084XLB	NY2EYE084XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE100XLB	NY2EYE100XLBE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE100XLB	NY2EYE100XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2EYE100XLB	NY2EYE100XLBE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE102XLOD	NY2EYE102XLAEOD		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE103XLOD	NY2EYE103XLAEOD		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE108XL	NY2EYE108XLAE		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE108XL	NY2EYE108XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2EYE108XL	NY2EYE108XLAE		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY2PDA022XLFLR	NY2PDA022XLAFRLS, NY2PDA022XLAFRLR		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY2PDA023XLFLR	NY2PDA023XLAF LRS, NY2PDA023XLAF LRF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY2PDE044XLFLR	NY2PDE044XLAEFLR		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	
NY4EPC079XLDC	NY4EPC079XLANDC		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY4EPC080XLDC	NY4EPC080XLANDC		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY4EPC081XLDC	NY4EPC081XLANDC		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY5EPC085XLCU	NY5EPC085XLANCU		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY5PDA036XLCU	NY5PDA036XAALCU		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite High Deductible	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY5PPC086XLCU	NY5PPC086XLANCU		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY5PPC087XLCU	NY5PPC087XLANCU		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY6PYE088XLCSEA	NY6PYE088XLAECSEA		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EDB039XLBPN	NY7EDB039XLBPNS, NY7EDB039XLBNPF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EDB060XLPN	NY7EDB060XLAPNS, NY7EDB060XLAPNF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EDB061XLPN	NY7EDB061XLAPNS, NY7EDB061XLAPNF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EDB062XLPN	NY7EDB062XLAPNS, NY7EDB062XLAPNF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY7EDB063XLPN	NY7EDB063XLAPNS, NY7EDB063XLAPNF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EDB064XLPN	NY7EDB064XLAPNS, NY7EDB064XLAPNF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EDB065XLPN	NY7EDB065XLAPNS, NY7EDB065XLAPNF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EDB066XLPN	NY7EDB066XLAPNS, NY7EDB066XLAPNF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EDE040XLBPN	NY7EDE040XLBEPN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EDA041XLBPN	NY7EDA041XLBPNNS, NY7EDA041XLBPNF		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EPC093XLBPN	NY7EPC093XLBPNP		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY7EPC093XLBPN	NY7EPC093XLBNPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EPC093XLBPN	NY7EPC093XLBNPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EPC094XLBPN	NY7EPC094XLBNPN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EPC094XLBPN	NY7EPC094XLBNPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EPC094XLBPN	NY7EPC094XLBNPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EPC110XLPN	NY7EPC110XLANPN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EPC110XLPN	NY7EPC110XLANPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY7EPC111XLPN	NY7EPC111XLANPN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EPC111XLPN	NY7EPC111XLANPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EPC111XLPN	NY7EPC111XLANPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EPC112XLPN	NY7EPC112XLANPN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EPC112XLPN	NY7EPC112XLANPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE096XLBPN	NY7EYE096XLBEPN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE104XLPN	NY7EYE104XLAEPN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY7EYE104XLPN	NY7EYE104XLAEPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE104XLPN	NY7EYE104XLAEPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE113XLPN	NY7EYE113XLAEPN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE113XLPN	NY7EYE113XLAEPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE114XLPN	NY7EYE114XLAEPN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE114XLPN	NY7EYE114XLAEPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE115XLPN	NY7EYE115XLAEPN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY7EYE115XLPN	NY7EYE115XLAEPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE116XLPN	NY7EYE116XLAEPN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE116XLPN	NY7EYE116XLAEPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE116XLPN	NY7EYE116XLAEPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO617ZL	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE117XLPN	NY7EYE117XLAEPN		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	Preferred Suite	Large	Pass	
NY7EYE117XLPN	NY7EYE117XLAEPN		In Base; apply "RX" to Medical Coplan Name + Optional Rider	No	RXNY2EPO616ZL	NY	AR43	Preferred Suite	Large	Pass	
NYSHIP01HMO2540XL	NYSHIP01HMO2540XL		In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	HMO	Large	Pass	

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Rider not coplan	N/A		515LGF	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		518LGF	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		522LGF	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		RX502LGF	No	No	NY	AR44	HMO	Large	Pass	
Rider not coplan	N/A		RX504LGF	No	No	NY	AR44	HMO	Large	Pass	
Rider not coplan	N/A		RX504LGF	RX507LGF	No	NY	AR44	HMO	Large	Pass	
Rider not coplan	N/A		RXNY1EPO600ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	

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Rider not coplan	N/A		RXNY1HMO600ZL	No	No	NY	AR44	HMO	Large	Pass	
Rider not coplan	N/A		RXNY1HMO601ZL	No	No	NY	AR44	HMO	Large	Pass	
Rider not coplan	N/A		RXNY1HMO602ZL	No	No	NY	AR44	HMO	Large	Pass	
Rider not coplan	N/A		RXNY1HMO603ZL	No	No	NY	AR44	HMO	Large	Pass	
Rider not coplan	N/A		RXNY1HMO604ZL	No	No	NY	AR44	HMO	Large	Pass	
Rider not coplan	N/A		RXNY1HMO609ZL	No	No	NY	AR44	HMO	Large	Pass	
Rider not coplan	N/A		RXNY2EPO600ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	

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Rider not coplan	N/A		RXNY2EPO603ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		RXNY2EPO605ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		RXNY2EPO606ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		RXNY2EPO607ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		RXNY2EPO608ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		RXNY2EPO609ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		RXNY2EPO610ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
Rider not coplan	N/A		RXNY2EPO611ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		RXNY2EPO612ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		RXNY2EPO613ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		RXNY2EPO615ZL	No	No	NY	AR43	Preferred Suite	Large	Pass	
Rider not coplan	N/A		RXVT3HMB500ZL	No	No	VT	AR44	VT HMO	Large	Pass	
Rider not coplan	N/A		RXVT3HMB501ZL	No	No	VT	AR44	VT HMO	Large	Pass	
Rider not coplan	N/A		RXVT3HMB502ZL	No	No	VT	AR44	VT HMO	Large	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
Rider not coplan	N/A		RXVT3HMB605ZL	No	No	VT	AR44	VT HMO	Large	Pass	
VT3HDH01AXL	VT3HDH01AXLS, VT3HDH01AXLF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
VT3HDH02AXL	VT3HDH02AXLS, VT3HDH02AXLF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
VT3HDH07AXL	VT3HDH07AXLS, VT3HDH07AXLF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
VT3HDH08AXL	VT3HDH08AXLS, VT3HDH08AXLF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
VT3HDH09AXL	VT3HDH09AXLS, VT3HDH09AXLF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
VT3HDH15AXL	VT3HDH15AXLS, VT3HDH15AXLF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	

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VT3HDL17AXL	VT3HDL17AXLS, VT3HDL17AXLF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
VT3HDL19EXLE	VT3HDL19EXLES, VT3HDL19EXLEF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
VT3HDL41EXLE	VT3HDL41EXLES, VT3HDL41EXLEF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
VT3HDL43EXLE	VT3HDL43EXLES, VT3HDL43EXLEF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
VT3HDL46AXL	VT3HDL46AXLS, VT3HDL46AXLF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
VT3HDL50EXLE	VT3HDL50EXLES, VT3HDL50EXLEF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
VT3HDL51EXLE	VT3HDL51EXLES, VT3HDL51EXLEF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	

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VT3HDH52AXL	VT3HDH52AXLS, VT3HDH52AXLF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
VT3HDH53EXLE	VT3HDH53EXLES, VT3HDH53EXLEF		In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	VT HMO HDHP	Large	Pass	
FRVT-HMO-B-004-S (2019)	FRVTHMOB004S19, FRVTHMOBA2004S19	MVP HMO Bronze 4 MVP HMO Bronze 4 American Indian / Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO	Small	Fail	\$1,700
FRVT-HMO-B-005-N (2019)	FRVTHMOB005N19, FRVTHMOBA2005N19	MVP HMO Bronze 5 MVP HMO Bronze 5 American Indian/Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO	Small	Fail	\$1,600
NY-EPOH-SB-006 (2019)	NYEPOHSB00619	MVP EPO HDHP Bronze 6	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO HDHP	Small	Fail	\$100
NY-EPO-SB-008 (2019)	NYEPOSB00819	MVP EPO Bronze 8	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Fail	\$1,500
NY-HMO-SB-010 (2019)	NYHMOSB01019	MVP HMO Bronze 10	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP HMO	Small	Fail	\$1,400

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FRVT-HMO-B-001-N (2019)	FRVTHMOB001N19, FRVTHMOBA2001N19	MVP HMO Bronze 1 MVP HMO Bronze 1 American Indian / Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO	Small	Pass	
FRVT-HMO-B-002-S (2019)	FRVTHMOB002S19, FRVTHMOBA2002S19	MVP HMO Bronze 2 MVP HMO Bronze 2 American Indian / Native Alaskan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO	Small	Pass	
FRVT-HMO-G-001-S (2019)	FRVTHMOG001S19, FRVTHMOGA2001S19	MVP HMO Gold 1 MVP HMO Gold 1 American Indian /Native Alsakan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO	Small	Pass	
FRVT-HMO-G-002-N (2019)	FRVTHMOG002N19, FRVTHMOGA2002N19	MVP HMO Gold 2 MVP HMO Gold 2American Indian /Native Alsakan	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO	Small	Pass	
FRVT-HMOH-B-003-S (2019)	FRVTHMOHB003S19S/F	MVP HMO HDHP Bronze 3	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO HDHP	Small	Pass	
FRVT-HMOH-G-003-N (2019)	FRVTHMOHG003N19S/F	MVP HMO HDHP Gold 3	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO HDHP	Small	Pass	
FRVT-HMOH-S-002-N (2019)	FRVTHMOHS002N19	MVP HMO HDHP Silver 2	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO HDHP	Small	Pass	

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FRVT-HMOH-S-004-S (2019)	FRVTHMOHS004S19S/F	MVP HMO HDHP Silver 4	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO HDHP	Small	Pass	
FRVT-HMO-P-001-S (2019)	FRVTHMOP001S19	VT HMO Platinum 1	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO	Small	Pass	
FRVT-HMO-S-001-N (2019)	FRVTHMOS001N19	VT HMO Silver 1	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO	Small	Pass	
FRVT-HMO-S-003-S (2019)	FRVTHMOS003S19	VT HMO Silver 3	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO	Small	Pass	
NY-EPOH-SB-003 (2019)	NYEPOHSB00319	MVP EPO HDHP Bronze 3	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO HDHP	Small	Pass	
NY-EPOH-SB-005 (2019)	NYEPOHSB00519	MVP EPO HDHP Bronze 5	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO HDHP	Small	Pass	
NY-EPOH-SB-007 (2019)	NYEPOHSB00719	MVP EPO HDHP Bronze 7	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO HDHP	Small	Pass	

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NY-EPOH-SG-002 (2019)	NYEPOHSG00219S/F	MVP EPO HDHP Gold 2	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO HDHP	Small	Pass	
NY-EPOH-SG-007 (2019)	NYEPOHSG00719S/F	MVP EPO HDHP Gold 7	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO HDHP	Small	Pass	
NY-EPOH-SS-003 (2019)	NYEPOHSS00319S/F	MVP EPO HDHP Silver 3	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO HDHP	Small	Pass	
NY-EPOH-SS-008 (2019)	NYEPOHSS00819	MVP EPO HDHP Silver 8	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO HDHP	Small	Pass	
NY-EPO-SB-002 (2019)	NYEPOSB00219	MVP EPO Bronze 2	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	
NY-EPO-SG-001 (2019)	NYEPOSG00119	MVP EPO Gold 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	
NY-EPO-SG-003 (2019)	NYEPOSG00319	MVP EPO Gold 3	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	

Medical Coplan Form	Medical Coplan As It May Appear In Facets	Plan Name	Pharmacy Benefit Rider	Deductible Rider (Optional)	Rider Changes Integrated Prescription Benefit (Optional)	State	LOB	Product Line	Size	Creditable Coverage Determination	Minimum integrated HRA contribution to meet creditable coverage**
NY-EPO-SG-004 (2019)	NYEPOSG00419	MVP EPO Gold 4	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	
NY-EPO-SG-006 (2019)	NYEPOSG00619	MVP EPO Gold 6	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	
NY-EPO-SG-008 (2019)	NYEPOSG00819	MVP EPO Gold 8	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	
NY-EPO-SP-001 (2019)	NYEPOSP00119	MVP EPO Platinum 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	
NY-EPO-SP-003 (2019)	NYEPOSP00319	MVP EPO Platinum 3	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	
NY-EPO-SP-005 (2019)	NYEPOSP00519	MVP EPO Platinum 5	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	
NY-EPO-SS-001 (2019)	NYEPOSS00119	MVP EPO Silver 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	

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NY-EPO-SS-002 (2019)	NYEPOSS00219	MVP EPO Silver 2	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	
NY-EPO-SS-004 (2019)	NYEPOSS00419	MVP EPO Silver 4	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	
NY-EPO-SS-007 (2019)	NYEPOSS00719	MVP EPO Silver 7	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP EPO	Small	Pass	
NY-HMOH-SB-009 (2019)	NYHMOHSB00919	MVP HMO HDHP Bronze 9	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP HMO HDHP	Small	Pass	
NY-HMOH-SG-002 (2019)	NYHMOHSG00219S/F	MVP HMO HDHP Gold 2	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP HMO HDHP	Small	Pass	
NY-HMOH-SS-003 (2019)	NYHMOHSS00319S/F	MVP HMO HDHP Silver 3	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP HMO HDHP	Small	Pass	
NY-HMO-SB-001 (2019)	NYHMOSB00119	MVP HMO Bronze 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP HMO	Small	Pass	

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NY-HMO-SB-002 (2019)	NYHMOSB00219	MVP HMO Bronze 2	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP HMO	Small	Pass	
NY-HMO-SG-001 (2019)	NYHMOSG00119	MVP HMO Gold 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP HMO	Small	Pass	
NY-HMO-SG-010 (2019)	NYHMOSG01019	MVP HMO Gold 10	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP HMO	Small	Pass	
NY-HMO-SP-002 (2019)	NYHMOSP00219	MVP HMO Platinum 2	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP HMO	Small	Pass	
NY-HMO-SP-006 (2019)	NYHMOSP00619	MVP HMO Platinum 6	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP HMO	Small	Pass	
NY-HMO-SS-012 (2019)	NYHMOSS01219	MVP HMO Silver 12	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP HMO	Small	Pass	
NY-HNY-SG-001 (2019)	NYHNYSG001S19	MVP Healthy NY Gold 1	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR44	MVP Healthy NY	Small	Pass	

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NY-PPO-SG-001 (2019)	NYPPOSG00119S/F	MVP PPO Gold 1 Single	In Base; apply "RX" to Medical Coplan Name	No	No	NY	AR43	MVP PPO	Small	Pass	
VT-HMOH-S-002-N II (2019)	VTHMOHS002NII19S/F	VT HDHMO Silver 2 - Reflective	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO HDHP	Small	Pass	
VT-HMOH-S-004-S II (2019)	VTHMOHS004SII19S/F	VT HDHMO Silver 4 Reflective	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO HDHP	Small	Pass	
VT-HMO-S-001-N II (2019)	VTHMOS001NII19	VT HyHMO Silver 1 - Reflective	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO	Small	Pass	
VT-HMO-S-003-S II (2019)	VTHMOS003SII19	VT HyHMO Silver 3 Reflective	In Base; apply "RX" to Medical Coplan Name	No	No	VT	AR44	MVP HMO	Small	Pass	